**Table S1:** Sensitivity analysis of multivariable model for association between regimen composition and sputum culture conversion, restricted to patients who received no Group 4 or 5 drugs with unknown drug susceptibility (N=440)

	Adjusted hazard ratio (95% confidence interval)
Average number of potentially effective drugs recei	ved per day
0 to <4	0.48 (0.35-0.65)
4 to <5	0.53 (0.41–0.69)
5 to <6	Reference
6 or more	1.38 (0.95-1.99)
Number of drugs to which resistant at baseline*	1.10 (0.98-1.23)
Resistance pattern at baseline:	
MDR only	Reference
MDR with resistance to any second-l	ine injectable 0.63 (0.38–1.06)
MDR with resistance to any fluoroqu	inolone <b>0.60 (0.38–0.94)</b>
Previous treatment history	
None	Reference
First-line drugs only	0.76 (0.52–1.13)
Second-line drugs	0.67 (0.43–1.04)
Unknown	0.27 (0.08-0.92)
Smear result	
Negative	Reference
Positive	0.60 (0.38–1.06)
Unknown	0.27 (0.11–0.71)
Extent of disease on chest radiograph	
Unilateral	Reference
Bilateral	0.73 (0.56–0.95)
Unknown	1.15 (0.49–2.74)

<sup>\*</sup>Continuous variable

Abbreviations: MDR = Multidrug-resistant

Hazard ratios result from multivariable Cox proportional hazard regression model for the association between regimen composition and time to initial sputum culture conversion as the outcome. All variables included in the model are shown, and analysis was stratified by country. The model included the following two interaction terms: average number of effective drugs received per day\*average number of untested drugs received per day; average doses of pyrazinamide received per day\*average number of untested drugs received per day. Initial sputum culture conversion was defined as at least two consecutive negative cultures of sputum samples collected at least 30 days apart.